

PART 2: SPECIAL MILK PROGRAM ONLY

GENERAL PROGRAM INFORMATION

Local Agency Name: _____ Number _____

A. SPECIAL MILK PROGRAM

- ☐ Special Milk Program only (No Reimbursable Meals)
- ☐ Special Milk Program for Split Session Kindergarten/Preschool

B. PRICING STRUCTURE

- ☐ Non-Pricing (No charge for milk)
- ☐ Pricing
 - ☐ Option 1 (All children charged the same price for milk regardless of eligibility)
 - ☐ Option 2 (Price charged for milk is based on eligibility, Gather applications for free milk)

Student price for milk: _____ Adult price for milk: _____

C. COST OF MILK: *Pricing Program Pricing Programs only: Actual cost of milk per half-pint paid to dairy for milk used in SMP:*

Whole _____ 2% _____ 1% _____ Skim _____ Flavored _____

D. DETERMINING/HEARING OFFICIALS

In compliance with **Part IV (B)(3) and (4)** Pricing Option 2 SMP:

Name and title of the person designated as the determining official for free/reduced eligibility is _____.

Name and title of the person designated as the hearing official is _____.

E. MILK BILLING AND PAYMENT COLLECTION Pricing Option 2 Programs Only:

Describe in detail (on a separate page if needed) the procedure which will be used to distribute notices of payment, collect payments for milk from students, distribute tokens, tickets, etc., and provisions for protecting the anonymity of students who receive free milk.

PART 3: SPECIAL MILK PROGRAM ONLY

SITE INFORMATION

Local Agency Name: _____ Number _____

A. **SITE NAME** (as listed in Educational Directory, license, or other official documents).

Physical Address _____

If physical address is other than a street address, please provide directions:

B. **NAME AND TITLE OF SITE SUPERVISOR** who oversees the Special Milk Program:

_____ Check if new ☐

Phone number _____ Fax number _____

E-mail _____

C. **OPERATING DATA:**

1. Hours of operation: From _____ To _____

2 Part 1F listed dates of operation. List in this item any full weeks during which the Program will *not* operate: (Include dates of closing and reopening)

From ____/____/____ To ____/____/____ From ____/____/____ To ____/____/____

3. Service times

	Service Time		Anticipated
	From	To	ADP
Breakfast			
Morning break			
Lunch			
Afternoon break			
Supper			
Evening break			

4. Describe how milk is served and how counts of milk to be served is determined.